

Fig. 1

Best Practice Idea Worksheet



Best Practice Idea Submission Sheet

To submit a Best Practice Idea, complete the first sheet of this form. If you have more information at this time, you may enter it on sheets 2 and 3. A member of the POT Support Team will contact you for additional information.

IDEA/BP TITLE:	Enter New Best Practice Name	
NAME OF REQUESTER	Enter Requester's Name	PHONE Enter Requester's Phone
CDS ID	Requester's CDS ID	REQUEST DATE mm/dd/yyyy

IDEA DESCRIPTION

Enter idea description here. use information from Idea Submission Form. Add details as needed.

RATIONALE FOR PROCESS CHANGE

Describe why the existing process needs changing or should be replicated.

Fig. 2a

802808						
2 Project Definition Sheet						
POT NUMBER & NAME Enter POT # an						Roundtable Name here
SEARCH FOR BEST PRACTICE DUPLICA	TION -	DATE CO	VIPLET	ED M	M/DD/YY	YY
RESULTS / COMMENTS Use "Search So	mrces"	Reference	e mate	rial Inc	licate resi	ilts of search
PROJECT GOAL			- 111410	11411 1111	iloute 105t	ares of scaron
Describe the end result of implementation	entino	the Rest	Practic	20		
20001100 the one result of implem	.c.iiiii	, uic Dest	LIACIIC	٠.		
BASELINE						
Briefly describe the current proce	ee Att	ach cuppo	rtina i	nformo	tion inclu	lina flavorhauta
Briefly describe the current proce	.33. FLU	acii suppo	rung n	monna	non metuc	ling nowcharts.
DESCRIPTION OF WORK COMPLETED T	N-DATI	=				
						.•
Briefly describe any work done to	o date (on the idea	ı. Atta	ch supp	orting into	ormation.
ASSESSMENT OF BENEFIT	High	Medium	Low	N/A	Estimate	Example
Quality						1-2 R/100
Cost			\equiv			\$1-2 M/year
Applied Time						0.5-3 FTEs
Cycle Time						4-6 weeks
RESOURCE IMPACT		-				
People for Development/Implementation			П	П		
\$ for Development/Implementation			一	H		
PROJECT DIFFICULTY						
Complexity				mmm	iiiiiiiiiiii	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Organizational Barriers	-		井			
SPONSOR SUPPORT	-	片片	井			
	_		ш			
ACTIVITIES AFFECTED List activities that	are exp	pected to u	se any	part of	the Best I	Practice process
						Ī

Fig. 26

3 Team Mem	ber Sheet									
Management Sup	port							:		
Role	Name		CDS I	D	Tel	ephone	Organization	Committed?		
Sponsor(s)										
								CDS Committed? D		
Roundtable Leader			L							
Best Practice Tea		_								
Role	Name	CI	OS ID	Telepho	ne	Organizatio	n Mgr. CDS ID	Committed?		
BP Team Leader										
Team Members*										
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						<u> </u>				
POT Support										
Team										
			-				 			
Development										
Leaders										
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^{*}Team members Include Subject Matter Experts (SMEs), Representative From Process Users / Deployment, Best Practice Requester, Ana A Financial Analyst (For Quantification)



Best Practice Prioritization Matrix

IDEA / BP TITLE: POT Number / Name: Date (of last revision):

Determine who will screen a potential Best Practice projects to decide if it is to be worked on, and where it will fall in the workload. The Prioritization Matrix can be used to clarify this issue and can be used as a basis for discussion with the team. Your decision will be based on three criteria: The amount of Sponsor support you've found for the project, the assessment of the net benefit (Savings minus cost / resources / etc. to develop the Best Practice, and the degree of difficulty in completing the project due to complexity, anticipated project length, etc.

Please refer to the Prioritization Matrix Instructions for more detailed information on using the matrix and calculating results.

Items	Average LMH	Requester LMH	Ind. #2 LMH	Ind. #3 LMH	Ind. #4	Ind. #5
Sponsor Support	LIVITI	LIVIT	LIVIN	LIVIN	LIVITI	LMH
Assessment of Net Benefits Savings (Example: Improved Quality, Cost savings, Reduced Applied / Cycle time)						
Project Difficulties (Example: Complexity, Organizational Barriers, Estimated Project length)						
Overall Priority (A B C)						
Total						

Prioritization Comments

- it the team determin	nes that the projec	t cannot be done now,	, itemize specific reason	s for decision.

3ig. 3

Process Ownership Team Project Tracker

POT Name / Number: Best Practice Supervisor:

	DOSE I TROUTE OUPERVIS												
		Overa	Priority		Project Sta	itus ("X"	When P	hase is Co	mpleted				
BP #	ldea BP Title	Letter	Number	Requester's CDS ID	1	Status	i	Analyze & Select	i	Approve	Deploy	Implement & Institu- tionalize	Last Review Date
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* From Prioritization Matrix

Best Practice 1-Pager Submission Template

Best Practice Title*	
POT#	ROUNDTABLE LEADER (CDS ISD)
Roundtable Name	Best Practice Team Leaders (CDS ID)
Functional Deploym	ent: Place check mark next to applicable areas of deployment
☐ Project Managem ☐ Body - VC ☐ Chassis - VC ☐ Veh. Engr VC ☐ Powertrain Engr ☐ PAV - VC ☐ Design/Appearanc	Finance - VC Powertrain Engr R&VT Core Marketing Brand - VC VA & SE - R&VT Core Systems VC PAV - R&VT Core PAV - R&VT Core Engine Purchasing - VC Transmission
Best Practice Descri	ption/Abstract
Brief How-To Steps	
Baseline/Rationale (for process Change
Benefits Summary	
	Cost
Required <	ocess Starts at: Process Ends at: < Enter FPDS Diamond Points or "X" where Start and/or End Point Timing Varies.
Attachment(s) Required	Filenames/URLs Additional Attachments Filenames/URLs
1. Baseline/Background	5.
2. Process Guideline	6.
3. Detailed Benefits	7.
4. Implementation Plan	8.

Fig. 5

BEST	PRACTICE	TITLE:	
BEST	PRACTICE	TEAM LEADER:	

BEST PRACTICE #:

ESTIMATED PROJECT START DATE:
RECOMMENDED METHOD (RAPID, Focused Improvement, SD, Series of Meetings, etc):

Key Project Milestones (Table can be modified to reflect differences in Rost Practice Projects)

Key Project Milestones (Table can be modified to re	<u> </u>		si rraciice rro	· · · · · · · · · · · · · · · · · · ·
Phase / Process Step	Target Start	Dates: Finish	Actual Finish Date	Individual Responsible
Develop Best Practice				
Condust Best Practice Team Kickoff Meeting				
Develop and Document Best Practice process				
Approve Best Practice				
Obtain Approvals (from Sponsor & POT Steering Team)				
Deploy Best Practice				
Complete Work Items and Update Documentation				
Conduct Pilot, if Necessary				
Select and Brief Key Players				
Complete Steps for Implementation Readiness				
Implementation & Institutional Best Practice				
Add Best Practice to Implementation Level Status Report (Harvey Ball Chart)				
Implement according to plan, and report status (ongoing)				
Periodic Review of Best Practice (indicate date of first review)				

Open Issues

Issue	Responsible	Open/Closed
		
		

TION/ENGINEERING GROUP NAME > Inctional Champion: John Doe Inal Champion Assistant: Jane Doe								
Production Program	#	#2	#3	\$4	42			
Best Practice Manager>>	Name 1	Name 2	Name 3	Name 4	Name 5	Objective	Status	Average(%)
Engineering Design Reviews	40	44	40	4①	4	20	10	50%
PD Electronic Library	4	4	4	4(4()	20	9	45%
Rapid Prototyping, Fab & Tooling		4()	4(4()		12	1	8%
Internal Stamping Part Approval	40	40	40	40	40	20	2	10%
		Manda	tory Bl	P Statu	s	72	22	31%
Implementation Levels. Best Practice to be Implemented.		ΧO]					
Some Aspects of B. P. Implemented.		X(A)						
Many Aspects of B. P. Implemented.		X						
Most Aspects of B. P. Implemented.		X					R	in.
B. P. Completely Implemented.		X					O	J'
Best Practice Not Applicable								

Implementation Objective Level. x = No. of circle quadrants set as objective (x = 1, 2, 3, 4)